PART B - FEE(S) TRANSMITTAL Mail Stop ISSUE FEE Complete and send this form, together with applicable fee(s), to: Mail Commissioner for Patents P.O. Box 1450 AUG 1 9 2004 Alexandria, Virginia 22313-1450 (703) 746-4000 or Fax INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. 7590 06/16/2004 James A. Wilke Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO, on the date indicated below. Foley & Lardner **Suite 3800** .777 East Wisconsin Avenue (Depositor's na Deborah A. Kocorowski Milwaukee, WI 53202-5306 Eborahant (Signat August 18, 2004 FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 10/776,142 02/11/2004 Michael Troy Winslett 089339-0387 TITLE OF INVENTION: EXTENDED ROTARY HANDLE OPERATOR APPLN. TYPE SMALL ENTITY **ISSUE FEE PUBLICATION FEE** TOTAL FEE(S) DUE DATE DUE nonprovisional \$1330 \$300 \$1630 09/16/2004 **EXAMINER** CLASS-SUBCLASS ART UNIT FRIEDHOFER, MICHAEL A 2832 200-331000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the Foley & Lardner LLP names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single  $\ensuremath{\square}$  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent Fee Address" indication (or "Fee Address" Indication form attorneys or agents. If no name is listed, no name PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Siemens Energy & Automation, Inc.

Alpharetta, GA

Please check the appropriate assignee category or category	ories (will not be printed on the patent);	individual	to corporation or other private group entity	□ governm
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XX Issue Fee	A check in the amount of the fee(s) is enclosed.			
XX Publication Fee	☐ Payment by credit card. Form PTO-2038 is attached.			
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

James A. Wilke.	Registration No. 34.279	08/18/04
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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AUG 2 3 2004

Atty. Dkt. No. 089339-0387

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Winslett, Michael Troy et al.

Title:

EXTENDED ROTARY

HANDLE OPERATOR

Appl. No.:

10/776,142

Filing Date:

02/11/2004

Examiner:

Friedhofer, Michael A.

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.

Deborah A. Kocorowski

(Printed Name)

borates corotist;

August 18, 2004 (Date of Deposit)

Art Unit:

2832

Mail Stop **ISSUE FEE**Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

## **TRANSMITTAL**

Sir:

Transmitted herewith are the following documents for the above-identified application.

- [X] Issue Fee Transmittal (2 pages).
- [X] Issue Fee Transmittal Form PTOL-85(B) (1 page).
- [X] Check No. 14444 in the amount of \$1,630.00 for payment of the Issue Fee (\$1,330.00) and for payment of the Publication Fee (\$300.00).

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

08-18-04

Ву\_\_\_\_

James A. Wilke

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Atty. Dkt. No. 089339-0387

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